

Entered - 01/19/01 - sb  
CL01L0060 - ALEXIS HOLMES

01-*R*-0437

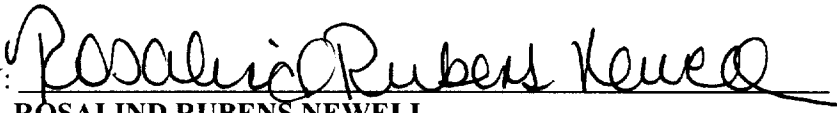
CLAIM OF: **ALLSTATE INDEMNITY COMPANY AS  
SUBROGEE OF CHARLES HILL  
P. O. Box 168288  
Irving, Texas 75016**

For damages alleged to have been sustained as a result of a vehicular accident on September 6, 2000 at Crew Street, NE.

BY PUBLIC SAFETY AND  
LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **ALLSTATE INDEMNITY COMPANY AS SUBROGEE OF CHARLES HILL** the sum of **\$2,000.00** in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on September 6, 2000 at Crew Street, NE as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD  
CITY ATTORNEY

BY:   
**ROSALIND RUBENS NEWELL**  
**DEPUTY CITY ATTORNEY**

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0060

Date: 3/01/01

Claimant /Victim CHARLES HILL  
BY: (Atty) (Ins.) ALLSTATE as Subrogee  
Address: P.O. Box 168288, Irving, Texas 75016  
Subrogation: X Claim for Property damage \$ 2,590.13 Bodily Injury \$ \_\_\_\_\_  
Date of Notice: 12/28/00 Method: Written, proper X Improper \_\_\_\_\_  
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X  
Date of Occurrence 9/6/00 Place: Crew Street, SE  
Department Public Works Division: Sewer Operations  
Employee involved Tramese E. Burnett Disciplinary Action: Written Reprimand and Defensive Driving Course

**NATURE OF CLAIM:** The claimant sustained vehicular damages when a City employee driving a City vehicle prematurely proceeded through a stop sign, and struck her vehicle.

### INVESTIGATION:

Statements: City employee X Claimant \_\_\_\_\_ Other \_\_\_\_\_ Written \_\_\_\_\_ Oral X  
Pictures \_\_\_\_\_ Diagrams X Reports: Police X Dept Report X Other \_\_\_\_\_  
Traffic citations issued: City Driver X Claimant Driver \_\_\_\_\_  
Citation disposition: City Driver Unknown Claimant Driver \_\_\_\_\_

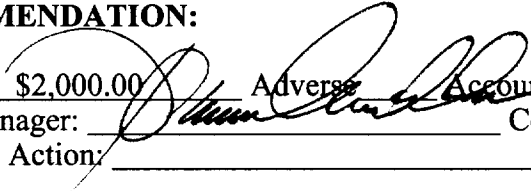
### BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial \_\_\_\_\_  
Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other \_\_\_\_\_ Damages reasonable X  
City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_  
Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_  
Claimant Negligent \_\_\_\_\_ City Negligent X Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - ALEXIS HOLMES

### RECOMMENDATION:

Pay \$ \$2,000.00 Adverse \_\_\_\_\_ Account charged: 1A01 X 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_  
Claims Manager:  Concur/date 03-02-01  
Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

**Allstate®**

ALLSTATE INDEMNITY COMPANY  
P.O. BOX 168268  
IRVING TX 75016

(800) 374-4246

*Holmes*  
*01/18/01*  
*DM*

12/26/00

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CITY OF ATLANTA, MUNICIPAL CLERK, LAW DEPT  
55 TRINITY AVE SW  
ATLANTA GA 303350332

OUR INVESTIGATION INDICATES THAT YOUR INSURED WAS RESPONSIBLE  
FOR THIS LOSS.

SINCE WE HAVE ALREADY MADE A SETTLEMENT WITH OUR POLICYHOLDER,  
THE CLAIM HAS BEEN ASSIGNED TO US. COPIES OF THE FINAL PAPERS  
RELATING TO THE LOSS ARE ENCLOSED.

PLEASE ACCEPT THIS LETTER AS NOTICE OF OUR SUBROGATION CLAIM.  
PLEASE FORWARD YOUR PAYMENT WITH OUR CLAIM NUMBER TO:

ALLSTATE PAYMENT PROCESSING CENTER  
P.O. BOX 227257  
DALLAS, TX, 75222-7257

DIRECT ANY OTHER CORRESPONDENCE TO THE ADDRESS AT THE TOP  
OF THIS LETTER.

SINCERELY,

CUSTOMER SERVICE

ALLSTATE INDEMNITY COMPANY

CEP:G

YOUR FILE NO. : SELF INSURED  
YOUR INSURED : CITY OF ATLANTA CLAIMANT  
ADDRESS : 675 Ponce de Leon  
ATLANTA GA 30330

OUR CLAIM NO. : 4095378057 FY5  
OUR INSURED : CHARLES HILL  
LOSS DATE : 09/06/00

LOCATION :  
CREW ST, ATLANTA ST

AMOUNT OF LOSS: \$2,734.28

01-*R*-0437

*\* PLEASE NOTE*

*CO INSURED'S vehicle is A*  
*TOTAL LOSS\**  
*ATLANTA GA*

*and salvage is being and proceeds*  
*are available - A complete*  
*package will be distributed*  
*that time.*  
*Thank you.*